

CLAIMS ONLY						Application Number 10780590	Filing Date	
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1							
2		1						
3								
4		1						
5								
6		1						
7								
8		1						
9								
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11		1						
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39								
40		1						
41								
42		1						
43								
44		1						
45	1							
46								
47								
48								
49								
50								
Total Indep								
Total Depend								
Total Claims								